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PTO/S8/21 (09-04)
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			Application Number	INTERNATION OF THE CONTROL NUMBER.								
TRANSMITTAL FORM			Filing Date		10/656,948 September 8, 2003							
			First Named Inventor	VASUD	VASUDEVA, Kailash C.							
			Art Unit	3677	3677							
(to be used for all correspondence after (nittal filing)			Examiner Name	RODI	RODRIGUEZ, Ruth C.							
Total Number of Pages in This Submission 11			Attorney Docket Number	PAT 5	PAT 51403A-2							
ENCLOSURES (Check all that apply)												
Fee Transmi	smittal Form		Drawing(s) Licensing-related Papers	-		After Allowance Communication to T Appeal Communication to Board of Appeals and Interferences						
Amendment/Repty After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement			Petition Petition to Convert to a Provisional Application Power of Attorney, Revocat Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C	Address		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):						
Firm Name	SIGNA	TURE O	F APPLICANT, ATT	ORNEY, C	RAG	ENT						
В	Firm Name BORDEN LADNER GERVAIS LLP											
Signature	Signature Affry Ww-7											
Printed name JEFFREY W. WONG												
Date January 11, 2006												
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the date shown below: Signature												
Jeff 54			<u> </u>									
Typed or printed name JEFFREY W. WO		DNG	G				January 11, 2006					

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Effective on		Complete if Known										
Fees pursuant to the Consolidated A		Application Number	948									
FEE IKAI	NSMITTAL	Filing Date September 8, 2003										
For F'	Y 2005	First Named Inven	Nor VASUE	VASUDEVA, Kailash C.								
Applicant claims small entity	stehus San 37 CED 1 27	Examiner Name	RODR	RODRIGUEZ, Ruth C.								
		Art Unit										
TOTAL AMOUNT OF PAYMENT	(\$) 475.00	Altorney Docket N	lo. PAT 51	103A-2								
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 501593 Deposit Account Name: Borden Ladner Gervais LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee												
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Information and authorization on PTO-2038.												
FEE CALCULATION												
1. Basic filing, search,												
	Small Entity		Small Entity	EXAMINATIC Sma	IN FEES Il Entity							
		ee (\$	Fee (\$)		5 0 (\$)	<u>Fees Pa</u>	<u>id (\$)</u>					
Utility 30		500	250	200 1	00 _							
Design 20		100	50	130	65 _							
Plant 20		300	150	160	80 _		· ·					
Rcissue 30	•	500	250	600 3	00 -							
Provisional 20	00 100	0	0	0	0 _							
2. EXCESS CLAIM FEES Fee Description						Fee (\$)	Fee (\$)					
Each claim over 20 or, for Rei	ssues, each claim over 20	0 and	d more than in the	original pate	ent	50	25					
Each independent claim over	or, for Reissues, each in	ndcp	endent claim more	e than in the	original patem		100					
Multiple dependent claims	A(-1 F (4)	.	Sald (d)			360	180					
Total Claims Extra 39 - 20 or HP = 19		475		Multiple Depe Fee (\$)	ndent Claims Fee Paid (/ \$ \						
HP = highest number of total claims	paid for, if greater than 20			1.00 (0)	1 DO F BIG	itat						
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3. APPLICATION SIZE FEE												
If the specification and draw	rings exceed 100 sheets of	of pa	per, the application	n size fee du	e is \$250 (\$12	5 for sm	all entity)					
Total Sheets Extr	a ccts or fraction thereof.	See of eac	33 D.S.C. 41(a)(1 :h_additional 50 or 1)(G) and 37 (fraction there	of Fee (\$)	Fee	Paid (\$)					
- 100 =	/50=		_ (round up to a wh			_ =	<u> </u>					
4. OTHER FEE(S)						Fee	s Paid (\$)					
Non-English Specification, \$130 fee (no small entity discount)												
Other:												
SUBMITTED BY												
Signature	414	Telephone 519-741-9100										
Name (Print/Type) Jeffrey W. V		Date January 11, 2006										

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